

Best Available Copy

POSITION	ID NO.	DATE
CLASSIFIER	28	9-21-5
EXAMINER	353	10-2
TYPIST	18	10-11
VERIFIER	201	10-13 94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final Original	
1 (1)	1-16-57
2	6
3	7
4	8
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6	10
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8	12
9 (13)	
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Claim	Date
Final Original	
41	51
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89	99
90	100

SYMBOLS

- ✓ Rejected
- = Allowed
- (Through numerals) Cancelled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected